

Application Data Sheet

Application Information

Application Number:: 09/566,921
Filing Date:: May 05, 2000
Application Type:: Continuation
Subject Matter:: Utility
CD-ROM or CDR?:: None
Number of CD Discs::
Number of copies of CDs::
Sequence Submission?:: Paper
Computer Readable Form (CRF?)::
Number of Copies of CRF::
Title:: GENES EXPRESSED IN ALZHEIMER'S DISEASE
Attorney Docket No.:: PA-0024-1 CON
Request for Early Publication:: No
Request for Non-Publication:: [Yes or No] [If yes, must submit signed statement under 35 USC 122(b)(2)(B)(i)]
Total Drawings Sheets:: 1
Small Entity:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
First Name:: Jeanne
Middle Name:: F.
Last Name:: Loring
Name Suffix::
City of Residence:: Del Mar
State or Province of Residence:: CA

Street of mailing address:: 12818 Via Grimaldi
City of mailing address:: Del Mar
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 92014

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
First Name:: Debora
Middle Name:: W.
Last Name:: Tingley
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Street of mailing address:: 119 Knollview Way
City of mailing address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94131

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
First Name:: Carla
Middle Name:: M.
Last Name:: Edwards

Name Suffix::

City of Residence:: Half Moon Bay

State or Province of
Residence:: CA

Street of mailing address:: 41 Ventura Street

City of mailing address:: Half Moon Bay

State or Province of mailing
address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing
address:: 94019

Correspondence Information

Correspondence Customer
Number:: 27904

Representative Information

Representative Customer
Number:: 27904

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
---------------	-------------------	-------------------------	----------------------

This Application	Continuation of	09/566,921	05/05/00
-----------------------------	-----------------	------------	----------

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
-----------	----------------------	---------------	--------------------

Assignee Information

Assignee name:: Incyte Corporation

Street of mailing address:: 3160 Porter Drive

City of mailing address:: Palo Alto

State or Province of mailing
address:: California

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94304